

**PUBLIC VOUCHER FOR PURCHASES & SERVICES OTHER THAN PERSONAL**

Bu. Vou. No. \_\_\_\_\_

Page 1 of 1

U. S. \_\_\_\_\_

(Department, bureau, or establishment)

Voucher prepared at \_\_\_\_\_

(Give place and date)

THE UNITED STATES, Dr.,

Payee's Account No. \_\_\_\_\_

To \_\_\_\_\_

Thompson Ramo Wooldridge, Inc.

(Payee)

Los Angeles 45, California

(Address)

(City)

(State)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)		QUANTITY	UNIT PRICE		AMOUNT	
		Discount Terms	Invoice No.		Cost	Per	Dollars	Cts.
			2396				16	60
			2397				604	77
			2398				13,494	85
			2399				397	58
			2400				15,623	00

PAYMENT:

Complete ☐  
Partial ☐  
Final ☐

Use continuation sheet(s) if necessary

Shipped from \_\_\_\_\_ to \_\_\_\_\_ Weight \_\_\_\_\_ Government B/L No. \_\_\_\_\_ Total 30,136 80

I certify that the above bill is correct and just and that payment has not been received.

(Payee must NOT use this space)

(Sign original only)

Differences \_\_\_\_\_

Date \_\_\_\_\_ \*Payee \_\_\_\_\_

(This certificate not required when a like certificate is made by payee on attached bill or bills)

Amount verified; correct for \_\_\_\_\_

30,136 80

(Signature or initials) *EE*

Per \_\_\_\_\_

Title \_\_\_\_\_

Contract No. A-101

Date \_\_\_\_\_

Req. No. \_\_\_\_\_

Date \_\_\_\_\_

Invoice Rec'd. \_\_\_\_\_

Pursuant to authority vested in me, I certify that this account is correct and proper for payment

† Approved for \$ \_\_\_\_\_

By \_\_\_\_\_

SIGN  
ORIGINAL  
ONLY

Title \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

STATINTL

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. \_\_\_\_\_ dated \_\_\_\_\_, 19\_\_\_\_, for \$ \_\_\_\_\_ } on Treasurer of the United States in  
{ Cash, \$ \_\_\_\_\_, on \_\_\_\_\_, 19\_\_\_\_. Payee \_\_\_\_\_ } favor of payee named above.

(Sign original only)

\* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary" or "Treasurer" as the case may be.  
† If the ability to certify is limited, only a portion of the above signature is necessary; otherwise the approving officer will sign on the line below "Approved for \$ \_\_\_\_\_", and over his official title.

Per \_\_\_\_\_

Approved For Release 2001/08/15 : CIA-RDP64-00360R000600040163-2